

# Scoring Matrix

Montana Children's Trust Fund Primary and Secondary Child Abuse and Neglect Prevention Program and Services  
DPHHS-RFP2016-0024

The evaluation committee will review and evaluate the offers according to the following criteria based on a maximum possible value of 300. The Narrative response and References Questions of the offer will be evaluated based on the following Scoring Guide and the Cost Proposal will be evaluated based on the formula set forth below:

Offeror Name: \_\_\_\_\_

Points Awarded: \_\_\_\_\_

Offer is:    Responsive    Nonresponsive

Comments: \_\_\_\_\_

| Question Group  | Question # | Possible Points | Points Awarded | Comments |
|---|------------|-----------------|----------------|----------|
| <b>Group 1: Letter of Transmittal</b>   |            |                 |                |          |
| Letter of Transmittal <ul style="list-style-type: none"> <li>• A one-page letter of transmittal</li> <li>• typed on the letterhead of the submitting organization</li> <li>• signed by the Executive Director</li> <li>• amount of funding requested;</li> <li>• organization's experience and structure;</li> <li>• number of years funded and amount(s) if applicable</li> <li>• short, concise statement of need;</li> <li>• the proposed methods or practices;</li> <li>• beginning and ending dates of the program;</li> <li>• names, address, and signatures of Program Director and applicant</li> <li>• (EIN) for the fiscal agent;</li> <li>• e-mail addresses and telephone numbers for liaison(s) for funded program.</li> </ul> | 1.1        | 10              |                |          |

| <b>Group 2: Abstract or Executive Summary</b>  |     |    |  |  |
|--|-----|----|--|--|
| <p><b>Abstract or Executive summary</b></p> <ul style="list-style-type: none"> <li>• outline the key points</li> <li>• limited to 2 pages of Times New Roman, size 12 font, one inch margins;</li> <li>• summarizes each Question Group in the proposal;</li> <li>• should be capable of speaking for the proposal if separated.</li> </ul>  | 2.1 | 20 |  |  |
| <b>Group 3: Statement of Need</b>  |     |    |  |  |
| <p><b>Statement of Need</b></p> <ul style="list-style-type: none"> <li>• Describe the needs and concerns in your demographic area. What are the separate elements of each?</li> <li>• Describe the demographics of the communities within the defined service area.</li> <li>• Is the program area a high risk area as defined by a needs assessment?</li> <li>• Describe the local resources that exist in your demographic area.</li> <li>• Describe the gaps between needs and available resources.</li> <li>• Describe the consequences of the unaddressed need(s) or problem(s).</li> <li>• Provide the number of children and families served during the last year.</li> </ul> | 3.1 | 40 |  |  |

| Group 4: Goals and Objectives  |  |  |  |  |
|--|--|--|--|--|
| <p>Group 4 acknowledgement</p> <p>Prevention.<br/>Describe the desired outcomes of the program and relate to the primary and secondary prevention of child abuse and neglect. Outline several specific, measurable indicators of how the program will attain the goals.</p> <p>Public Awareness.<br/>Include Public Awareness as one of the goals and show through the objectives how the program intends to carry out activities at the community level to promote funded program services and the MT CTF. Awareness materials must include the MT CTF logo in vectored format.</p> <p>Child Abuse Prevention Month.<br/>Describe the activities the program will coordinate or participate in observance of April as Child Abuse Prevention Month (Strengthening Families Month). Public information activities that focus on the healthy, positive development of parents and children along with the promotion of child abuse and neglect prevention activities may be included.</p> <p>Developing a continuum of services for underserved populations.<br/>Provide a brief narrative on how your program will work to serve underserved populations listed as the target population in the Description or how your program will collaborate in your community to help address issues related to the respective target population.</p> | <p>4.1</p> <p>4.2</p> <p>4.3</p> <p>4.4</p> <p>4.5</p> | <p>Pass/Fail</p> <p>15</p> <p>15</p> <p>15</p> <p>15</p> |  |  |

|  |     |    |  |  |
|--|-----|----|--|--|
| <p>Parental involvement in program planning and evaluation.</p> <p>Describe how your program will accomplish meaningful Parent Leadership. Parent Leadership occurs when parents address the challenges of parenting, gain the knowledge and skills to function in meaningful leadership roles and represent a “parent voice” to help shape the direction of their families, programs and communities. Shared Leadership is successfully achieved when Parents Leaders and professionals build effective partnerships and share responsibility, expertise and leadership in decisions being made that affect families and communities.</p> | 4.6 | 15 |  |  |
| <b>Group 5: Methods</b>  |     |    |  |  |
| <p>Group 5 acknowledgement</p> <p>5.1</p> <p>Pass/Fail</p>   |     |    |  |  |
| <p>Evidence-based or Evidence-informed program/model.</p> <p>Briefly summarize the program's overall approach or procedures. If your program adapts the evidence-based program, describe how your program will measure the outcomes, the rationale behind the adaptation, if you have contacted the program's developer regarding the adaption, and how the adaptation applies to your community. Conduct serious considerations before any adaption or modification of an evidence-based program occurs.</p> <p>5.2</p> <p>10</p>   |     |    |  |  |
| <p>Program Activities.</p> <p>Describe the program, implementation steps, phases of activities and relation to the goals and objectives. Include:</p> <p>Activities that will enhance parent</p> <p>5.3</p> <p>15</p>  |     |    |  |  |

|   |     |    |  |  |
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| <p>participation, leadership, and involvement in the planning, implementation and evaluation of funded programs and the network. Description of how your organization will include community partners and work together to reach goals and objectives</p>   |     |    |  |  |
| <p><b>Description of Service Delivery/Work Plan/Timetables.</b></p> <p>This Question includes a work plan in a table format that includes tasks and timelines, connected to the identified goals and objectives. The work plan or timetable serves as a program implementation and monitoring tool helpful for launching the program when funded and for ensuring its timely completion. Relate the work plan back to the resources and needs demonstrated by the Statement of Need. Include how the program will achieve each stated objective within the proposed timeline. Include a summary of the program tasks, logically sequenced with beginning and ending dates, displayed in a chart, schedule, or diagram of whom, or what organization within your council, will be responsible for the tasks.</p> <p>The work plan is a useful tool for determining the practicality and probability of the proposed program activities within the timeframe and is essential for demonstrating this to the MT CTF Board.</p> | 5.4 | 15 |  |  |
| <p><b>Logic Model.</b></p> <p>Include a logic model. A logic model is a simple, logical illustration of what, why, and how the program will be successful. The components of the Logic Model are: Vision; Target Population; Population Needs; Outcomes; Indicators; Measurement; Services; and Assumptions. See MT CTF Definitions in Prerequisites. Use the Logic Model template provided.</p>  | 5.5 | 20 |  |  |

| Group 6: Offeror Qualifications   |     |    |  |  |
|---|-----|----|--|--|
| <p><b>Organizational Capability</b></p> <ul style="list-style-type: none"> <li>• Describe the Organization's Mission and Vision, history of the organization, how the services and philosophy have evolved; and resources and strengths.</li> <li>• Describe the general experience and significant accomplishments of the organization (the evidence of credibility and merits of past performance such as professional accreditation and/or any awards.)</li> <li>• Provide a description and include the list of names, addresses and phone numbers of the members of the organization's Advisory Board and/or other committee members, their qualifications and roles in the organization.</li> <li>• Describe the structure of the Administration</li> <li>• Include reviews of the overall staffing for the program including positions, roles and responsibilities, levels of effort, job descriptions of all funded positions, staff coordination, and administration. Include years of experience providing services similar to those proposed; education requirements; and certifications where applicable. Identify what role each person would fulfill in performing work identified in this RFP. Describe the use of volunteers and parent leaders. Include any funded consultants or subcontractors under this grant. Include a copy of the subcontract, if applicable.</li> <li>• Provide proof of incorporation or certified statement of government status, 501C-3.</li> <li>• Provide a valid copy of the Workers' Compensation Coverage Certificate valid for the duration of the contract. If the current certificate expires during the contract term, the Contractor is required to submit a copy of the new certificate.</li> <li>• Provide a valid copy of the Certificate of Liability Insurance. Coverage must be valid for the duration of the contract. If the current coverage expires during the contract term the Contractor is required to submit a copy of the new certificate.</li> </ul> | 6.1 | 40 |  |  |

|   |     |    |  |  |
|---|-----|----|--|--|
| <b>Resumes.</b><br>Provide a resume or summary of qualifications, work experience, education, and skills for all key personnel, including any subcontractors, who will be performing any aspects of the funded contract. Resumes shall be included in the Appendix/Attachment Section.  | 6.2 | 5  |  |  |
| <b>Parents'/Consumers' References.</b><br>Offeror shall provide at least two (2) original letters of support from parents/consumers that are currently using or have used services of the type proposed with the program in this RFP. The MT CTF Board reserves the right to use any information or additional references deemed necessary to establish the ability of the offeror to perform the contract. Negative references may be grounds for proposal disqualification. | 6.3 | 10 |  |  |
| <b>Cooperating Organizations.</b><br>Programs must demonstrate cooperation, collaboration and support from community partners as a requirement of the application.<br>1. Discuss who the program will work/partner with, how and why.<br>2. Provide MOUs for each cooperating organization.<br>3. Describe the process for referrals in the community.<br>4. Provide at least 2 original letters of support from community partners.  | 6.4 | 15 |  |  |
| <b>Group 7: Cost Proposal</b>   |     |    |  |  |
| Budget Table And Narrative  | 7.1 | 25 |  |  |

## **SCORING GUIDE**

In awarding points to the evaluation criteria, the evaluator/evaluation committee will consider the following guidelines:

**Superior Response (95-100%):** A superior response is an exceptional reply that completely and comprehensively meets all of the requirements of the RFP. In addition, the response may cover areas not originally addressed within the RFP and/or include additional information and recommendations that would prove both valuable and beneficial to the agency.

**Good Response (75-94%):** A good response clearly meets all the requirements of the RFP and demonstrates in an unambiguous and concise manner a thorough knowledge and understanding of the project, with no deficiencies noted.

**Fair Response (60-74%):** A fair response minimally meets most requirements set forth in the RFP. The offeror demonstrates some ability to comply with guidelines and requirements of the project, but knowledge of the subject matter is limited.

**Failed Response (59% or less):** A failed response does not meet the requirements set forth in the RFP. The offeror has not demonstrated sufficient knowledge of the subject matter.

| Maximum<br>Point Value | Superior | Good    | Fair    | Failed |
|------------------------|----------|---------|---------|--------|
| 5                      | 5        | 4       | 3       | 0 - 2  |
| 10                     | 10       | 8 - 9   | 6 - 7   | 0 - 5  |
| 15                     | 14 - 15  | 11 - 13 | 9 - 10  | 0 - 8  |
| 20                     | 19 - 20  | 15 - 18 | 12 - 14 | 0 - 11 |
| 25                     | 24 - 25  | 19 - 23 | 18 - 15 | 0 - 14 |
| 40                     | 38 - 40  | 30 - 37 | 24 - 29 | 0-23   |